BEST AVAILABLE COPY

POSITION INITIALS ID NO. DATE

FEE DETERMINATION
O.I.P.E. CLASSIFIER
FORMALITY REVIEW
RESPONSE FORMALITY REVIEW

ID NO. DATE

9/12/02

10-13-00

10-13-00

INDEX OF CLAIMS

	Pajacted	N	Non-elected
	Rejected	ï	Interference
	Allowed		Appeal
_	(Through numeral) Canceled		Objected
	Restricted	U	

	Claim Date	Claim Date
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If more than 150 claims or 10 actions staple additional sheet here